

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.G.		7/28/99
O.I.P.E. CLASSIFIER		49	7/30/99
FORMALITY REVIEW	561	60245	8-11-99

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final Original	
1	11/8/99
2	11/8/99
3	11/8/99
4	11/8/99
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Claim	Date
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100	11/8/99

Claim	Date
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Form (Rev.